

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	
Computer Readable Form (CRF)?::	
Title::	METHODS AND COMPOSITIONS FOR TREATMENT OF AUTOIMMUNE DISEASES
Attorney Docket Number::	PEPT-P01-006
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	10
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Kai
Middle Name::	W.
Family Name::	Wucherpfennig
City of Residence::	Brookline
Country of Residence::	MA
Street of mailing address::	67 Highland Road

City of mailing address:: Brookline

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02441

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Family Name:: Rasmussen

City of Residence:: Cambridge

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 75 Cambridge Parkway, Unit E410

City of mailing address:: Cambridge

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02142

Applicant Authority Type:: Inventor

Primary Citizenship Country:: People's Republic of China

Status:: Full Capacity

Given Name:: Bei

Family Name:: Yu

City of Residence:: West Roxbury

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 72 Willowdean Avenue

City of mailing address:: West Roxbury

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02132

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Eric  
Family Name:: Zanelli  
City of Residence:: Sudbury  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 160 Woodside Road  
City of mailing address:: Sudbury  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01776

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jack  
Middle Name:: L.  
Family Name:: Strominger  
City of Residence:: Lexington  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 2030 Massachusetts Avenue  
City of mailing address:: Lexington  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02173

### **Correspondence Information**

Correspondence Customer Number:: 28120

### Representative Information

Representative Customer Number:: 28120

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	US05/006822	03/01/05
US05/006822	An application claiming the benefit under 35 USC 119(e)	60/549409	03/01/04
US05/006822	An application claiming the benefit under 35 USC 119(e)	60/551396	03/09/04

### Foreign Priority Information

### Assignee Information

Assignee name:: Peptimmune, Inc.  
Street of mailing address:: 64 Sidney Street, Suite 380  
City of mailing address:: Cambridge  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02139